PART B - FEE(S) TRANSMITTAL

his form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

ap in , m

ppropriate. All further	correspondence includired below or directed other	ig the Patent, advance o	rders and notification of a specifying a new corre	maintenance fees w	vill be mailed to	the current c	correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
GENE WARZI LINVATEC CO 11311 CONCEP LARGO, FL 337	ECHA RPORATION T BOULEVARD	FEB FEB	U 2 2007 I he Stai add tran	Cer creby certify that the tes Postal Service we ressed to the Mail smitted to the USP	tificate of Maili is Fec(s) Transm is from the sufficient po Stop ISSUE F TO (571) 273-28	ng or Transmittal is being stage for first EE address a 85, on the da	deposited with the United class mail in an envelope above, or being facsimile te indicated below.
2/02/2007 SSITHIB2		10666644	-	JANE	ET C. C	OLE 110	(Depositor's name) (Signature)
1 FC:1501 14	00.00 DA 00.00 DA				Lusty	29,2	007 (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	. 0	ATTORNEY DO	CKET NO.	CONFIRMATION NO.
10/666,644	09/18/2003	·	Giuseppe Lombardo		ZL 018	39 .	8511
ITLE OF INVENTION	: SOFT TISSUE ANCH	OK .	.				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	NO .	\$1400	\$300	\$0		\$1700	02/28/2007
EXAMINER ART UNIT			CLASS-SUBCLASS				
SWIGER III, JAMES L 3733 606-072000							
Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the pages of up to 3 registered extent extensions 1 GENE WARZECHA							
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
LINVAT	CEC CORPORATION	LARGO, FLORIDA					
lease check the appropriate assignee category or categories (will not be printed on the patent):							
a. The following fee(s) a	are submitted:	4	b. Payment of Fee(s): (Ples	ase first reapply ar	ny previously pa	id issue fee sl	hown above)
	o small entity discount p	ermitted)	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-38/1 (enclose an extra copy of this form)							
	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no lon	ger claiming SMAI	LL ENTITY state	ıs. See 37 CFI	R 1.27(g)(2).
OTE: The Issue Fee and terest as shown by the r	d Publication Fee (if requeecords of the United Sta	aired) will not be accepte tes Patent and Trademark	d from anyone other than t	he applicant; a regi	stered attorney o	r agent; or the	assignee or other party in
Authorized Signature	Cene	Wared		Date	1/29/0	7	
Typed or printed name	GENE WAR	ZECHA		Registration N	lo. 28,	919	•
his collection of information.	ation is required by 37 C	FR 1.311. The information	on is required to obtain or i	retain a benefit by t	he public which	s to file (and l	by the USPTO to process)

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.